

PATENT APPLICATION
DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 002441.00183 (PP020662.0006)

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **IMMUNOGENIC COMPOSITIONS FOR CHLAMYDIA TRACHOMATIS**
 the specification of which

was filed on December 19, 2005 as Application Serial Number 10/561,236 and was amended on December 19, 2005.

was filed under the Patent Cooperation Treaty (PCT) and accorded International Application No. PCT/US2004/020491, filed June 25, 2004.

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.

Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
Great Britain	0315020.8	June 26, 2003	YES
Great Britain	0402236.4	February 2, 2004	YES

Prior United States Provisional Application(s)

We hereby claim priority benefits under Title 35, United States Code, 119(e)(1) of any U.S. provisional application listed below:

U.S. Provisional Application No.	Date of Filing (day month year)	Priority Claimed Under 35 U.S.C. 119(e)(1)
60/497,649	August 25, 2003	YES: <input checked="" type="checkbox"/> NO: <input type="checkbox"/>
60/576,375	June 1, 2004	YES: <input checked="" type="checkbox"/> NO: <input type="checkbox"/>

Prior United States Application(s)

We hereby claim the benefit under Title 35, United States Code, 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, 112, we acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Date of Filing (Day, Month, Year)	Status Patented, Pending, Abandoned

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 002441.00183 (PP020662.0006)

POWER OF ATTORNEY:

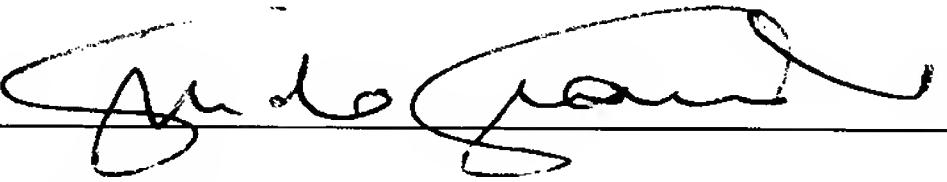
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) listed below and those associated with

Customer No. 22907

to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to:	Customer No. 22907	Direct Telephone Calls To:	
Contact Name	Dale Hoscheit	Contact Name	Dale Hoscheit
Firm Name	Banner & Witcoff, LTD.	Contact Phone Number	202-824-3000
Firm Address	1100 13th Street, N.W. Suite 1200		
City, State and Zip	Washington, DC 20005-4051		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature  Date 12 feb 2008Full Name of First Inventor GRANDI
Family Name Guido
First Given Name

Residence Nona Strada, 4 SEGRATE 20090 (MI) Citizenship IT

Post Office Address Novartis Vaccines and Diagnostics, Inc. (formerly Chiron Corporation),
P.O. Box 8097, Emeryville, CA, 94662-8097Signature  Date 12 Feb 2008Full Name of Second Inventor FINCO
Family Name Oretta
First Given Name

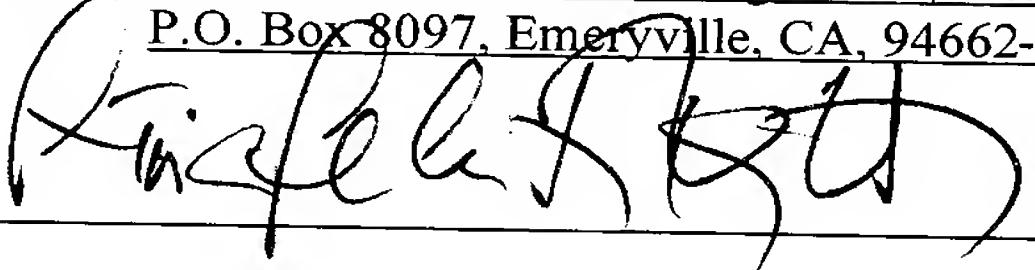
Residence Via Rinascente, 2 RAPOLANO TERME 53040 (SI) Citizenship IT

Post Office Address Novartis Vaccines and Diagnostics, Inc. (formerly Chiron Corporation),
P.O. Box 8097, Emeryville, CA, 94662-8097

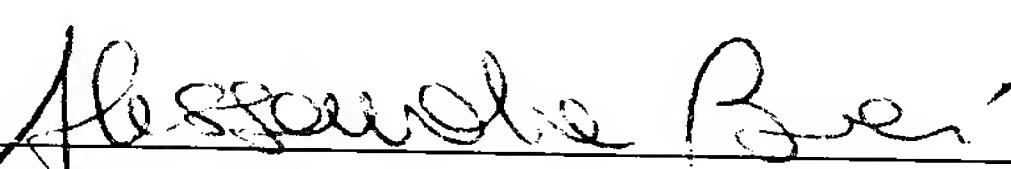
DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 002441.00183 (PP020662.0006)

Signature _____ Date _____

Full Name of Third Inventor RATTI Family Name Giulio (Deceased)
First Given Name First Given NameResidence Via Cittadini, 13 SIENA 53100 ITALY Citizenship ITPost Office Address Novartis Vaccines and Diagnostics, Inc. (formerly Chiron Corporation),
P.O. Box 8097, Emeryville, CA, 94662-8097Signature  Date 14/02/2008Legal Representative of Deceased LEHUTOVA Family Name Livia
First Given Name First Given NameResidence Via Cittadini, 13 SIENA 53100 ITALY Citizenship ITPost Office Address Via Cittadini, 13 SIENA 53100 ITALYSignature  Date 13/02/08Full Name of Fourth Inventor BONCI Family Name Alessandra
First Given Name First Given NameResidence Via B. Lucari, 34 TAVERNE D'ARBIA 53100 (SI) ITALY Citizenship ITPost Office Address Novartis Vaccines and Diagnostics, Inc. (formerly Chiron Corporation),
P.O. Box 8097, Emeryville, CA, 94662-8097

I hereby further declare that Alessandra BONCI is the correct spelling of my name and that the name Alessandro BONCI, shown on the corresponding PCT published application WO 2005/002619, resulted from a typographical error when the PCT application Request was prepared.

Signature  Date 13/02/08Typewritten Name: BONCI Family Name Alessandra
First Given Name First Given Name